



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. BRI-00027

Group Art Unit: 2872)
Examiner: Mark A. Robinson)
Inventor(s): Mark Olijnyk, et al.)
Serial No.: 09/692,435)
Filed: October 19, 2000)
Title: EXTERIOR MIRROR)

**RESPONSE
AND AMENDMENT**

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Box Non-Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

This is in response to the Office Action mailed November 1, 2002. The Applicant respectfully requests reconsideration of the Examiner's rejections in view of the foregoing amendments and the remarks set forth below.

IN THE CLAIMS

The claims have been rewritten as follows:

Claim 1. (Thrice Amended) An exterior mirror for a vehicle comprising:

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PTO/SB/21 (08-00)

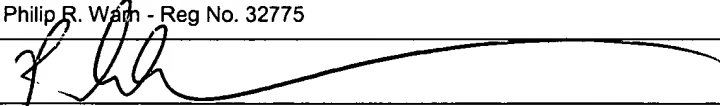
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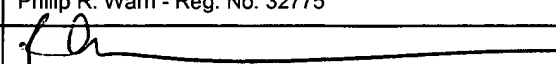
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/692,435	
	Filing Date	October 19, 2000	
	First Named Inventor	Mark Olijnyk, et al.	
	Group Art Unit	2872	
	Examiner Name	Mark A. Robinson	
Total Number of Pages in This Submission		Attorney Docket Number	BRI-00027

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks Applicant believes no fee to be due for the attached filing, however, should additional fees be due in order to prevent the abandonment of this application, please consider this as authorization to charge Deposit Account No. 501612 (Warn, Burgess & Hoffmann, P.C.) for any such fees due. A duplicate copy of this document is enclosed for this purpose.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Warn, Burgess & Hoffmann, P.C. Philip R. Warn - Reg No. 32775
Signature	
Date	January 31, 2003

CERTIFICATE OF MAILING	
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Typed or printed name	Philip R. Warn - Reg. No. 32775
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Date	January 31, 2003

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